#### Case 20-10061-ABA Doc 59 Filed 01/27/21 Entered 01/27/21 15:15:06 Desc Main Document Page 1 of 7

Fill in this information to identify your case:							
Debtor 1	Eubie L. Bethea						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY					
Case number	20-10061						
()							

■ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	78,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	54,920.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	132,920.00
Par	t 2: Summarize Your Liabilities		
			i <b>abilities</b> nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	107,716.83
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	5,000.00
	Your total liabilities	\$	112,716.83
Par	t 3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I)		2,474.00
4.	Copy your combined monthly income from line 12 of Schedule I	\$	
		\$ \$	2,186.00
5.	Copy your combined monthly income from line 12 of Schedule I	\$ \$	2,186.00
5. Par	Copy your combined monthly income from line 12 of Schedule I	·	
<ul><li>4.</li><li>5.</li><li>Par</li><li>6.</li><li>7.</li></ul>	Copy your combined monthly income from line 12 of Schedule I	·	•

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Eubie L. Bethea Case number (if known) 20-10061

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

\$\_\_\_\_\_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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	in this information to ident	, ,								
Deb	otor 1 <u>Eubi</u>	ie L. Betl	nea			_				
	otor 2 ouse, if filing)					_				
Uni	ted States Bankruptcy Cou	urt for the:	DISTRICT OF NEW J	ERSEY		_				
Cas	se number <b>20-10061</b>	l				С	heck if this is:			
(If kr	nown)						An amende	d filing		
							A suppleme 13 income a			
0	fficial Form 106	<u> </u>					MM / DD/ Y	YYY		
S	chedule I: You	r Inco	ome							12/15
atta	use. If you are separated ch a separate sheet to the table table to the table ta	is form. (					e number (if k		swer every	
	information.			☐ Employed			☐ Emplo		ig spouse	
	If you have more than one job, attach a separate page with information about additional employers.		Employment status	■ Not employed			☐ Not er			
	Include part-time, season self-employed work.	nal, or	Occupation  Employer's name							
	Occupation may include or homemaker, if it applies		Employer's address							
			How long employed the	nere?						
Par	t 2: Give Details Al	bout Mon	thly Income							
	mate monthly income as use unless you are separa		te you file this form. If y	ou have nothing to	report for	any line, v	vrite \$0 in the	space. Inclu	ude your no	n-filing
	u or your non-filing spouse e space, attach a separate			mbine the informat	ion for all e	employers	for that perso	n on the line	es below. If	you need
						For	Debtor 1	For Debt non-filing	or 2 or g spouse	
2.	List monthly gross was deductions). If not paid				2.	\$	0.00	\$	N/A	
3.	Estimate and list month	hly overti	me pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income	e. Add lin	e 2 + line 3.		4.	\$	0.00	\$	N/A	

Debt	or 1	Eubie L. Bethea	_	C	ase	number (if known)	_2	20-100	161		
	0	av Bras Albara	4			Debtor 1				pouse	
	Col	py line 4 here	4.		\$_	0.00	-	\$		N/A	<u>-</u>
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	0.00	_	\$		N/A	<u></u>
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	_	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$_	0.00	_	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$	0.00	_	\$		N/A	_
	5e.	Insurance	5e		\$	0.00	_	\$		N/A	_
	5f.	Domestic support obligations Union dues	5f.		$_{\$}^{\$}-$	0.00	_	\$		N/A	_
	5g. 5h.	Other deductions. Specify:	5g 5h		\$ _	0.00 0.00	_	·		N/A N/A	_
^			_		Ψ_		_	· —			_
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	,	<sup>⊅</sup> —	0.00	_	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	→	0.00	_	\$		N/A	_
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$	0.00	_	\$		N/A	_
	8b.	Interest and dividends	8b	٠.	\$	0.00	_	\$		N/A	<u>-</u>
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation	8c 8d		\$_ \$_	0.00	_	\$		N/A N/A	_
	8e.	Social Security	8e	٠.	\$	1,242.00		\$		N/A	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$_	0.00	_	\$		N/A	_
	8g. 8h.	Pension or retirement income	8g 8h		\$_ \$	782.00	_	\$		N/A	_
	OII.	Other monthly income. Specify: Daughter's rent for PA property		·.Ŧ	Ψ_	450.00	_ T	Ψ		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		2,474.00		\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,474.00 + \$	:		N/A	= \$	2,474.00
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		2,474.00			17/	-  <sup>•</sup> -	2,474.00
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not ecify:	r depe						hedule 11.		0.00
12.	Wri	d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	2,474.00
13.	Do	you expect an increase or decrease within the year after you file this form	1?						ı	Combi month	ned ly income
		No.									

Official Form 106l Schedule I: Your Income page 2

Fill	I in this information to identify your case:			
Deb	Eubie L. Bethea	c	heck if this is:  An amended fi	ilina
Deb	btor 2		•	showing postpetition chapter
	pouse, if filing)	_		is of the following date:
Unit	ited States Bankruptcy Court for the: DISTRICT OF NEW JERSEY		MM / DD / YYY	YY
	se number <b>20-10061</b> known)			
0	official Form 106J			
S	chedule J: Your Expenses			12/15
Be info nui	e as complete and accurate as possible. If two married people are filing toge formation. If more space is needed, attach another sheet to this form. On the mber (if known). Answer every question.  It 1: Describe Your Household			
1.				
	■ No. Go to line 2.  □ Yes. <b>Does Debtor 2 live in a separate household?</b>			
	□ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate	e Household of D	Debtor 2.	
2.	Do you have dependents? ☐ No			
	Do not list Debtor 1 and	t's relationship to or Debtor 2	Dependent age	's Does dependent live with you?
	Do not state the			□ No
	dependents names. Wife			■ Yes
				□ No
				Yes
				□ No
				Pes
				□ No
3.	Do your expenses include expenses of people other than yourself and your dependents?			□ Yes
Est	rt 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are usin penses as of a date after the bankruptcy is filed. If this is a supplemental So plicable date.			
the	clude expenses paid for with non-cash government assistance if you know e value of such assistance and have included it on <i>Schedule I: Your Income</i> fficial Form 106I.)		Your	expenses
4.	The rental or home ownership expenses for your residence. Include first near payments and any rent for the ground or lot.	nortgage 4	. \$	625.00
	If not included in line 4:			
	4a. Real estate taxes	4a	. \$	0.00
	4b. Property, homeowner's, or renter's insurance		. \$	0.00
	4c. Home maintenance, repair, and upkeep expenses		. \$	0.00
5	4d. Homeowner's association or condominium dues  Additional mortgage payments for your residence, such as home equity los		. \$ . \$	0.00

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Debtor 1 <u>Eu</u>	bie L. Bethea	Case num	ber (if known)	20-10061
6. Utilities:				
	ctricity, heat, natural gas	6a.	\$	160.00
6b. Wa	ter, sewer, garbage collection	6b.	\$	30.00
6c. Tel	ephone, cell phone, Internet, satellite, and cable services	6c.	\$	60.00
6d. Oth	er. Specify: Cell phones	6d.	\$	120.00
	housekeeping supplies	7.	\$	450.00
Childcare	and children's education costs	8.	\$	0.00
Clothing,	laundry, and dry cleaning	9.	\$	75.00
	care products and services	10.	\$	50.00
	ind dental expenses	11.	\$	50.00
	tation. Include gas, maintenance, bus or train fare.			
	clude car payments.	12.	\$	100.00
. Entertain	ment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
. Charitabl	e contributions and religious donations	14.	\$	0.00
Insurance	9.			
	clude insurance deducted from your pay or included in lines 4 or 20.			
15a. Life	insurance	15a.	·	0.00
15b. Hea	alth insurance	15b.	\$	0.00
15c. Vel	nicle insurance	15c.	\$	0.00
15d. Oth	er insurance. Specify:	15d.	\$	0.00
	o not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
	nt or lease payments:		•	
	payments for Vehicle 1	17a.	· -	0.00
	payments for Vehicle 2	17b.	·	0.00
	er. Specify:	17c.	·	0.00
	er. Specify:	17d.	\$	0.00
	ments of alimony, maintenance, and support that you did not report		¢	0.00
	from your pay on line 5, Schedule I, Your Income (Official Form 106)	l). 10.	\$	
	ments you make to support others who do not live with you.	40	Ф	0.00
Specify:	I was now to a was a set included in lines 4 or 5 of this form or an So	19.	Incomo	
	Il property expenses not included in lines 4 or 5 of this form or on Sc rtgages on other property	enedule I: Yo 20a.		239.00
	al estate taxes	20a. 20b.		
		20b. 20c.	·	27.00
	perty, homeowner's, or renter's insurance		·	0.00
	intenance, repair, and upkeep expenses	20d.	•	0.00
	meowner's association or condominium dues	20e.	·	0.00
. Other: Sp	pecify: Water	21.	+\$	100.00
. Calculate	your monthly expenses			
	lines 4 through 21.		\$	2,186.00
	/ line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	2,:00:00
		-	\$	2 406 00
220. Aud	line 22a and 22b. The result is your monthly expenses.		Φ	2,186.00
3. Calculate	your monthly net income.			
	by line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,474.00
23b. Co	by your monthly expenses from line 22c above.	23b.	-\$	2,186.00
				.,
23c. Sub	otract your monthly expenses from your monthly income.			200.00
	e result is your monthly net income.	23c.	\$	288.00
For examp	xpect an increase or decrease in your expenses within the year after e, do you expect to finish paying for your car loan within the year or do you expect you to the terms of your mortgage?			ease or decrease because of a
	[E. L. L.			
Yes.	Explain here:			

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Fill in this infor	mation to identify your	case:	
Debtor 1	Eubie L. Bethea		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number	20-10061		
(if known)			

#### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below			
Dic	d you pay or agree to pay someone who is NOT an attorney to	help	you fill out bankrupt	cy forms?
	No			
	Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	der penalty of perjury, I declare that I have read the summary a t they are true and correct.	and s	schedules filed with th	nis declaration and
Х	/s/ Eubie L. Bethea	Х		
	Eubie L. Bethea Signature of Debtor 1		Signature of Debtor 2	
	Date <b>January 26, 2021</b>		Date	